P SITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*AN*	7031	12/7
O.I.P.E. CLASSIFIER		401008	12-6-99
FORMALITY REVIEW			10-29-99
			3/31/00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral) Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date										Claim		Date								Claim		Date							
Final	Original											Final	Original									Final	Original									
	1												51										110									
	2												52										112									
	3												53										113									
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	49												99										149									
	50												100										150									

If more than 150 claims or 10 actions
staple additional sheet here

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